

REMARKS

This application has been reviewed in light of the Office Action mailed August 24, 2007. Reconsideration of this application in view of the below remarks is respectfully requested. Claims 1 – 19 are pending in the application with Claims 1 and 16 – 18 being in independent form. By the present amendment, Claims 1, 16 and 18 are amended and Claims 8, 17 and 19 are canceled.

Claims 1, 16, 18 are amended include the features recited in Claims 8, 17 and 19, respectively, and to explicitly point out that information transfer selection, information to be recorded selection and information to be recorded checking is performed by a user through an interface provided on a display screen, as shown in, e.g., FIG. 11 – 13 and 22 – 23.

Accordingly, no new subject matter is introduced into the disclosure by way of the present amendment.

I. Rejection of Claims 1 – 19 Under 35 U.S.C. § 103(a)

Claims 1, 2, 4, 5, 8, 10, 12, 16 and 17 are rejected under 35 U.S.C. § 103(a) as allegedly obvious over U.S. Patent No. 5,701,904 issued to Simmons in view of U.S. Patent No. 6,114,370 issued to Wall. Additionally, Claims 3, 6, and 9 are rejected by the Examiner under 35 U.S.C. § 103(a) as allegedly obvious over Simmons in view of Wall and further in view of U.S. Publication No. 2004/0153443 (hereinafter, “MacDonald”). Further, Claims 7, 11, 13 – 15 and 18 – 19 are rejected by the Examiner under 35 U.S.C. § 103(a) as allegedly obvious over Simmons in view of Wall and MacDonald and further in view of U.S. Patent No. 5,797,838 issued to Oka.

As stated above, Claims 8, 17 and 19 have been canceled, therefore the rejections with respect to these claims are rendered moot. The following is provided in

addressing the rejections with respect to the remaining claims, namely Claims 1 – 7, 9 – 16 and 18.

Simmons discloses an endoscopic system, however Simmons fails to disclose or suggest an anesthesia-apparatus related system including an anesthesia administering apparatus for administering anesthesia to a patient, as recited in Applicant's Claims 1 and 16 – 18. In overcoming this deficiency in Simmons, the Examiner looks to the teaching in Wall of an anesthetic compound (Midazolam Hydrochloride) that may be injected intravenously into a patient.

However, with regards to the teachings of Wall, while the reference does disclose an anesthetic compound that may be injected into a patient, no disclosure or suggestion is made in Wall that the anesthesia administering apparatus is included in an anesthesia-apparatus related system connected to a predetermined communication circuit.

Returning to Simmons, the portable medical diagnostic apparatus disclosed is for use in an examination room not an operating room, as indicated by the fact that the apparatus is intended to be used in situations and locations where an onsite physician is either not readily available or altogether not feasible. (See: col. 1, lines 10 – 55). In addition, there is no disclosure in Simmons regarding an anesthesia apparatus related system, nor a suggestion that such an anesthesia-apparatus related system is connectable to the valise 2. Consequently, Simmons also fails to disclose or suggest Applicants' information creating portion for creating combined anesthesia-endoscopic image information by associating anesthesia information sent from the anesthesia-apparatus related system through the transceiver and endoscopic image information detected in the endoscopic system with a same patient.

Moreover, neither Simmons nor Wall disclose or suggest that a user information selection and a user checking interface are provided on a display screen as recited in Applicant's independent Claims 1, 16 and 18. These interfaces, as shown in, e.g., FIG. 11 – 13 and 22 – 23, allow a user of the present invention to selectively choose whether or not to add particular information to the information to be recorded and also to verify the information to be added by way of the user checking interface. Both the interface features and the functions enabled by these features are not disclosed or suggested in either Wall or Simmons.

Regarding MacDonald and Oka, the references fail to overcome the above-identified deficiencies in Simmons and Wall, in that neither MacDonald nor Oka, taken alone or in any proper combination with Simmons and Wall, discloses or suggests providing in an operating room and usable with an anesthesia-apparatus related system connected to a predetermined communication circuit, the anesthesia-apparatus related system including an anesthesia administering apparatus for administering anesthesia to a patient; and an information creating portion for creating combined anesthesia-endoscopic image information by associating anesthesia information sent from the anesthesia-apparatus related system through the transceiver and endoscopic image information detected in the endoscopic system with a same patient. Nor does any proper combination of the cited references provide teaching or suggestion of a user information selection interface or a user checking interface

Therefore, for at least the reasons provided above, Claims 1 – 7, 9 – 16 and 18 are believed to be allowable over the cited prior art references. Accordingly, Applicant respectfully requests withdrawal of the present rejections with respect to Claims 1 – 7, 9 – 16 and 18 under 35 U.S.C. § 103(a) over any proper combination of the teachings and suggestion provided in Simmons, Wall, MacDonald and Oka.

CONCLUSIONS

In view of the foregoing amendments and remarks, it is respectfully submitted that all claims presently pending in the application, namely, Claims 1 – 7, 9 – 16 and 18 are believed to be in condition for allowance and patentably distinguishable over the art of record.

If the Examiner should have any questions concerning this communication or feels that an interview would be helpful, the Examiner is requested to call Applicant's undersigned attorney at the number indicated below.

Respectfully submitted,



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